**AB 959 – The LGBT Disparities Reduction Act**
Author: Assemblymember David Chiu, 17th Assembly District
Sponsor: Equality California

**In Brief**
AB 959 would require various state agencies that provide health and human services to members of the LGBT community to collect voluntarily provided information about sexual orientation and gender identity (SOGI) in the regular course of collecting other types of demographic data. AB 959 would also require that the aggregated SOGI data that act as indicators of disparities be reported to the Legislature and made publicly available.

**The Issues**
Due to the systemic exclusion of data collection of LGBT communities, significant disparities in their health and welfare have been prolonged compared to the broader community. LGBT communities face disproportionately high rates of poverty, suicide, homelessness, isolation, substance abuse, and violence, and low rates of health insurance. These issues are more prevalent for youth and seniors, communities of color, and transgender and undocumented communities. Collecting voluntary data on SOGI is a necessary first step to understand the extent to which LGBT communities are experiencing disparities and whether government programs are effectively reaching LGBT individuals in need of care and assistance.

**The Solution**
A comprehensive landscape of data incorporating the needs and trends in every community is imperative to reducing disparities and ensuring that all Californians receive the care and services they need. It is high time for the LGBT community to count and be counted in California.

**For More Information**
Jo Michael, Legislative Manager
Equality California
619-204-4995
jo@eqca.org

Samantha Seng, Legislative Aide
Office of Assemblymember David Chiu
916-319-2017
samantha.seng@asm.ca.gov

**Background**
We know from various studies, including those by the U.S. Department of Health and Human Services and the Institute of Medicine, that health disparities impacting lesbian, gay, bisexual and transgender people are real. These disparities include: higher risk for cancer, mental illness, and other diseases, as well as higher rates of smoking and substance abuse.

Specific data collection for California’s LGBT communities is critically important for the state to provide appropriate services. Currently, California does not consistently collect demographic data related to SOGI. The following are examples of the limited data available for the LGBT community:

Data from the 2013 California Health Interview Survey shows that one-third of lesbian couples and 20.1% of gay male couples without a high school diploma are in poverty, compared to 18.8% of different-sex married couples; African American same-sex couples have poverty rates more than twice the rate of different-sex married African Americans; among women 18-44 years old, more than a quarter of bisexual women are poor (29.4%) and more than 1 in 5 lesbians are in poverty (22.7%).

**Support**
Equality California (Sponsor)
ACLU
API Wellness Center
California Council of Community Mental Health Agencies
California LGBT Health and Human Services Network
California Pan-Ethnic Health Network
Gay-Straight Alliance Network
The LGBTQ Center of Long Beach
Lavender Youth Recreation and Information Center
Lutheran Social Services of Northern California
Meals on Wheels of San Francisco
Mental Health America of Northern California
National Center for Lesbian Rights
Native American Health Center
Openhouse
Our Family Coalition
Queer LifeSpace
Rafiki Coalition for Health and Wellness
Rainbow Community Center of Contra Costa
Sacramento LGBT Community Center
San Francisco Department of Aging and Adult Services
San Francisco HIV/AIDS Provider Network
Shanti Project